

SERIAL NO.  
**09/762081**  
FILING DATE: August 2000  
APPLICANT(S)

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
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TOTAL IND.	2		/			
TOTAL DEP.	13		/			
TOTAL CLAIMS	15		2			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.			/					
TOTAL DEP.			/					
TOTAL CLAIMS			2					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS